CALL TO on Protection from Gender-Based Violence in Emergencies

JOINT STATEMENT ON GENDER-BASED VIOLENCE & COVID-19

Statement issued by the Call to Action on Protection from Gender-Based Violence in Emergencies (Call to Action) on the impacts of the COVID-19 pandemic on gender-based violence and relevant considerations in its humanitarian response:

The COVID-19 pandemic and international response is an unprecedented moment in recent history. As the pandemic spreads, women and girls will continue to experience the impacts of COVID-19 -- and the measures to control it -- differently from men and boys. Examples of these differences include: negative impacts on sexual and reproductive health and rights, including reduced access to comprehensive sexual and reproductive health services; women's overrepresentation in the health and social sector workforces placing women at heightened risk of exposure to the disease; reduced access to education, particularly due to increased household responsibilities; and financial implications for women due to loss of household income.

Physical, sexual, psychological and economic forms of gender-based violence (GBV) – present in all forms, in every corner of the globe - increase during times of crisis due to shifts in social structures and norms combined with pre-existing and systemic gender inequality, a root cause of GBV. Existing inequalities for women and girls are exacerbated throughout the COVID-19 pandemic. Vulnerability to COVID-19 and other risks stemming from response measures may also be increased for those who experience multiple and intersecting forms of discrimination such as indigenous women and girls, older women, women and girls with disabilities or for other factors such as race, sexual orientation, socioeconomic status, religion, ethnicity, migrant or refugee status.

Women and girls living in humanitarian contexts will experience the impacts of COVID-19 more profoundly for many reasons, including shocks to already limited health systems.

Key GBV concerns within the COVID-19 pandemic include:

- Increased risk of violence, including intimate partner violence and psychological abuse, as well as increased severity in pre-existing violence;
- Discontinued or disrupted access to GBV response services including GBV case management and clinical management of rape as well as sexual and reproductive health services and rights;
- Increased risk of sexual exploitation and abuse, including by humanitarian actors;
- Increased risk of negative coping mechanisms and issues related to economic pressures, such as child, early and forced marriage; and
- Increased forms of economic violence where women and girls are denied basic necessities including food, income, education and medical treatment.

The Call to Action partners call upon states, international organizations and non-governmental organizations delivering humanitarian programming in response to the COVID-19 pandemic to follow the recommendations below.

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Urgent collective priorities:

- Step up to the UN Secretary General's call to place the safety of women and girls at the centre of all COVID-19 preparedness efforts, pandemic impact analyses, funding appeals and response plans, including the addition of a specific objective on GBV within the Global Humanitarian Response Plan;¹
- Ensure that GBV services are recognised as life-saving and officially designated as "essential" for the COVID-19 response and that staff providing such services are equipped with the necessary protective equipment to operate safely; and
- Adapt and expand GBV service provision as necessary to address heightened risks faced by women and girls as a result of the pandemic and accompanying movement restrictions.

We also urge all partners to:

- Ensure the equal representation, leadership and meaningful participation of women and girls in COVID-19 response planning and decision-making;²
- Dedicate adequate and flexible financial/human resources to deliver safe and high-quality GBV prevention, risk mitigation and response programming, including ways to adjust programming to the current crisis;
- Ensure that women and girls are able to access information, including through digital technologies, on how to prevent and respond to the pandemic, taking into account access to and knowledge of different technologies and other specific requirements;
- Recognize the link between gender inequality and GBV, and take action to shift harmful gender norms that drive GBV, such as through sensitization of men, boys and communities;
- Conduct a gender analysis and disaggregate COVID-19 response data by sex, age and disability
 while making certain that the highest standards of data protection, confidentiality and ethics are
 employed;
- Recognize that GBV risk mitigation, including protection from sexual exploitation and abuse (PSEA), is the responsibility of all humanitarian actors and sectors; and
- Ensure frontline workers in all sectors are trained on how to handle disclosures of GBV in accordance with inter-agency endorsed <u>GBV Pocket Guide</u>.

Specific recommendations for states, international organisations and non-governmental organisations, as well as technical resources, are included in the attached annex.

Background on the Call to Action

The Call to Action on Protection from Gender-Based Violence in Emergencies (Call to Action) is a global multi-stakeholder initiative launched in 2013 to fundamentally transform the way gender-based violence (GBV) is addressed in humanitarian emergencies. The aim is to drive change and foster accountability so that every humanitarian effort, from the earliest stage of a crisis, includes the policies, systems and mechanisms to prevent, mitigate and respond to GBV.

¹ UN Secretary General's recommendation in the 9 April policy brief, "The Impact of COVID-19 on Women."

² For example: community consultations on locations of water and sanitation facilities and emergency health clinics; engagement of women and girls' critical voices in hygiene promotion; ensuring gender issues, including GBV, are included in high level discussions on policy, curfews, etc.

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ANNEX

Specifically, we urge states to:

- Ensure that states' humanitarian responses to COVID-19 prominently and meaningfully feature GBV prevention, risk mitigation and response, as well as other protection concerns such as the protection of children;
- Provide adequate funding for GBV within COVID-related appeals and ensure these funds are not diverted from ongoing humanitarian operations supporting GBV prevention, mitigation and response programming;
- Work with service providers and implementing partners in a flexible manner to adjust existing GBV prevention, mitigation and response programming to reflect necessary changes to priorities and field implementation during the COVID-19 pandemic response, while ensuring that GBV prevention and response, as lifesaving activities, continue to be prioritized;
- Ensure that health sector actors continue to maintain and adapt the provision of sexual and reproductive health services, including the provision of modern contraceptives, taking into consideration IPC measures and reduced mobility;
- Prioritize access to and maintain funding for sexual and reproductive services, particularly the Minimum Initial Service Package, including access to family planning and modern contraceptives, as well as pre- and post- natal healthcare, to ensure critical health services operate in tandem with COVID-19 response and with minimum interruption;
- Maintain access to legal services for GBV survivors, such as emergency protective orders;
- Support strengthening the UN system's coordination and support to non-governmental organizations, including ensuring funding is accessible and flexible; and
- Require that other (non-GBV) sectors integrate GBV risk mitigation measures throughout all aspects of COVID-19 response.

We urge international organizations to:

- Improve the coordination of humanitarian response to GBV and the COVID-19 outbreak, including strengthening the broader UN system to align different layers of coordination, roll out of country-level plans and increasing support to non-governmental organizations;
- Ensure that funding to humanitarian appeals for COVID-19 include allocations to GBV programming and that this be recognized as a non-negotiable component of the COVID-19 response; and
- Ensure increased direct funding to local, regional and women's organizations, including to GBV service providers, to adapt to COVID-19 related movement constraints, recognizing the contextspecific expertise and longevity of such organizations.

We urge non-governmental organizations to:

- Ensure the provision of PPE and other protective measures as a precondition for local, regional and women's organizations to operate safely;
- Ensure increased direct funding to local, regional and women's organizations, including to GBV service providers to adapt to COVID-19 related movement constraints, recognizing the contextspecific expertise and longevity of such organizations;

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- Regularly reassess the overall operational environment and make necessary adaptations to ensure safe and confidential GBV service provision; and
- Ensure transparent and accessible communication with women and girls about availability of services and prioritise programme designs that are informed by women and girls, ensuring information is communicated through safe channels.

Please find below selected resources that have been adapted to the COVID-19 response:

- GBV AoR's GBV Case Management Guidance;
- Minimum Initial Service Package for sexual and reproductive health rights;
- GBVIMS+'s COVID-19 Pandemic Guidance;
- Interagency GBV Minimum Standards;
- Interagency Tip Sheet on <u>Identifying & Mitigating Gender-based Violence Risks within the COVID-19 Response;</u>
- IASC's Interim Technical Note on Protection from Sexual Exploitation and Abuse (PSEA) during <u>COVID-19 Response</u>; and
- IASC's <u>GBV Pocket Guide</u> for frontline workers in all sectors on how to handle disclosures of GBV.

These recommendations are made as of 29 April 2020; please check back on the Call to Action <u>website</u> for additional recommendations as Call to Action partners continue to assess this rapidly evolving situation.